

NATIONAL TUBERCULOSIS ASSOCIATION

DEDICATED TO THE CONTROL OF TUBERCULOSIS AND OTHER RESPIRATORY DISEASES 1796 BROADWAY, NEW YORK 19, N. V. CIRCLE 5-8690 CABLE ADDRESS: NATUSAS

June 16, 1961

The Honorable John Fogarty, Chairman House Appropriations Subcommittee on Labor-HEW U.S. House of Representatives Washington. D.C.

Dear Congressmen Fogarty:

In recent years the National Tuberculosis Association has extended its interests and efforts beyond tuberculosis control to include the broad scope of all respiratory diseases which affect or are transmitted by the respiratory tract. Of necessity, tuberculosis specialists are involved with diagnosis and treatment of all conditions of the chest; the growing incidence of chronic respiratory disease has aroused concern among many of these physicians. It is the hope of the NTA and its medical arm, The American Thoracic Society, that their resources can contribute as effectively to the control of all respiratory diseases as they have to the campaign against a contagious respiratory disease for the past half century.

The increase in mortality from many chronic respiratory illnesses is alarming. Deaths from emphysema, considered a relatively rare disease a decade ago, grew steadily from 3639 in 1955 to 7728 in 1959. The death rate for cancer of the respiratory system has shown a relentless trend upward, increasing 25 per cent in the past five years, the most rapid rise in rate of any site in the neoplasm group. In 1959, deaths from this cause exceeded those for diabetes, cirrhosis of the liver, and motor accidents -- all major causes of death in our society. In 1959, respiratory diseases, including pneumonia but excluding cancer of the respiratory system and tuberculosis, were the cause of almost 80,000 deaths; with the inclusion of the two latter diseases, the total exceeded 128,000.

Because reporting of cases is not required for most of these diseases due to their non-communicable nature, their influence as a cause of disability cannot be precisely evaluated. However, interviews of the population during the National Health Survey indicate that respiratory conditions of all types are the major cause of days of restricted activity.

The vulnerability of lung tissue to invasion by bacteria or viruses or to degenerative changes may well be affected by extrinsic man-made agents. It is only common sense to suspect the unfavorable role of atmospheric pollution in this increasing incidence of chest ailments. Animal experimentation has shown that effects of continuous exposure to chemical substances are often destructive.

We would be naive indeed to believe, with our exploding industrial technology, that the pollution of our air, water, and soil will lessen spontaneously. Unless there is recognition by Congress of the need for a centrally directed program for control of environmental pollution under the aegis of the Public Health Service and that this program should receive highest priority, the many valuable efforts of that agency as well as a host of others in the Federal government will continue to be diluted.

The Board of Directors of the NTA expressed this philosophy in the following resolution adopted in May 1961:

WHEREAS, The NTA has a broad interest in the protection of health, particularly in the prevention and control of respiratory diseases which result from infectious, chemical and physical agents.

AND WHEREAS, It is increasingly clear that chemical and physical agents in all air, water, soil and food -- all living and working environment -- constitute a growing threat,

AND WHEREAS, The effect of such noxious and toxic substances are cumulative -- albeit sometimes exceedingly slow -- and are exerted by surface action and by ingestion as well as by inhalation,

THEREFORE BE IT RESOLVED, That the NTA express major concern about all environmental health hazards, particularly as they relate to respiratory diseases and that the NTA urge prompt and vigorous action to be taken to bring about their control through a heightened and expanded national program under the leadership of the U.S. Public Health Service.

We have seen tuberculosis, a communicable disease which was the leading cause of death in this country as late as 1909, bow to the combined onslaught of medical advances and public health control. Although more than 50,000 new cases of the disease in an active form are reported annually, a statistic which reveals our failure to exploit to the maximum our weapons for control, the trend of the disease is consistently downward.

The early campaign against tuberculosis faced what must have seemed almost insurmountable odds -- widespread prevalence of the disease, lack of public understanding or rejection of control efforts because of the stigma attached to tuberculosis, pathetically few tuberculosis hospitals, and no therapy except isolation and rest, a form of treatment which requires the greatest discipline and faith on the part of the patient. What was to be achieved in tuberculosis control came about through the willingness of certain leaders to tackle a tremendous problem. In our opinion, the problem of pollution of man's environment can be defined in these same terms -- tremendous, challenging and urgent.

The American public cannot be expected to appreciate the degree of hazard which they have created for themselves in the by-products of their great technological advances. It is therefore the responsibility of public health agencies to recognize the necessity for an all-out campaign to control it to the point where at least the atmosphere around us is as safe as twentieth century knowledge can make it. While the NTA is gravely concerned about the threat of air pollution, its emphasis in no way is to be construed as minimizing the need for renewed effort to combat stream pollution and other environmental health hazards which are mounting threats to our well being.

The NTA sincerely requests your earliest possible consideration of its proposal because of the urgency of the situation, and offers its services in any way possible in this important campaign.

Sincerely yours,

James E. Perkins, M.D.

James E. Perkin

Managing Director

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